## CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Candidate

Election Year: \_\_

## STATEMENT OF ECONOMIC INTERESTS.

**COVER PAGE** 

1 2010

CONTEA COSTA COUNTY ELECTIONS

2010 APP -5 PM_2	2:08APu	blic Document	ELECTIONS
Please Type or print WILL APR -5 PM 2	MGINAT."		GUS A COUNTY
NAME (LAST)	(FIRST)	(WIDDLE)	" DAYTIME TELEPHONE NUMBER
Gioia	John	М	
MAILING ADDRESS STREET	CITY	STATE   ZIP CODE	OPTIONAL: E-MAIL ADDRESS
(Business Address Acceptable)		السمة المه	
1. Office, Agency, or Court		4. Schedule Summar	У
Name of Office, Agency, or Court:		► Total number of pages 2	
Contra Costa Board of Supervisors	404	including this cover page	3:
Division, Board, District, if applicable:		► Check applicable schedules or "No reportable	
One		interests."	
Your Position:		I have disclosed interests on one or more of the attached schedules:	
Member, Board of Supervisors		Schedule A-1 Yes – schedule attached Investments (Less Irlan 10% Ownership)  Schedule A-2 Yes – schedule attached Investments (10% or Greeler Ownership)	
► If filing for multiple positions, list additional agency(ies)/			
position(s): (Attach a separate sheet if necessary,)			
Agency:			
		Schedule B	
Position:	The same standard specification of the same standard same	Real Property	
	***************************************		chedule attached
2. Jurisdiction of Office (Chec	k at least one box)	Income, Loans, & Business Po and Travel Payments)	Sitions (Income Other Vian Gitts
☐ State		Schedule D	chedule attached
County of Contra Costa		Income – Gifts	
City of	The transfer of the second	Schedule E  Yes - so	chedule attached
Multi-County	TO COMPANY OF THE PROPERTY OF	Income – Gifts – Travel Payme	ents
Other		-or-	
		No reportable interests o	in anv schedule
3. Type of Statement (Check a	t least one box)		ar dry serieus.
Assuming Office/Initial Date: _			
_		5. Verification	
Annual: The period covered is Janu through December 31, 2009.	iary 1. 2003,	I have used all reasonable	
-or-		statement. I have reviewed the of my knowledge the information	L L
O The period covered is/	, through	attached schedules is true and	- 1
December 31, 2009,	-		ry under the laws of the State
Leaving Office Date Left:/_ (Check one)		of California that the foregoing	
O The period covered is January 1, 2009, through the date of leaving office.		Me	irch 31, 2010
		Date Signed Maich 31, 2010	
O The period covered is/	_/through		
the date of leaving office.		Signatur (File the originally signal	d statement with your filing official.)

## SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION		
Name		
John Gioia		

▶ 1. INCOME RECEIVED	▶ 1. INCOME RECEIVED	
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME	
Partnership for Children and Youth		
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	
1611 Telegraph Ave., Oakland, CA 94612		
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	
Non Profit Corporation		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION	
Spouse's income		
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED	
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000	
▼ \$10,001 - \$100,000 □ OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000	
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income	
☐ Loan repayment	Loan repayment	
Sale of	Sale of	
(Property, car, boal, etc.)	(Property, cat, boal, etc.)	
Commission or Rental Income. list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more	
_		
Other(Describe)	Other(Describe)	
> 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERI		
* You are not required to report loans from commercial	lending institutions, or any indebtedness created as part	
of a retail installment or credit card transaction, made		
	rour official status. Personal loans and loans received	
not in a lender's regular course of business must be o	disclosed as follows:	
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)	
	%	
ADDRESS (Business Address Acceptable)		
	SECURITY FOR LOAN	
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence	
	Real Property	
HIGHEST BALANCE DURING REPORTING PERIOD	Street address	
HIGHEST BALANCE DURING REPORTING PERIOD  \$500 - \$1,000	CRy	
F	CRy	
\$500 - \$1,000		
\$500 - \$1,000 \$1,001 - \$10,000	CRy	
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	CRy Guarantor	
\$500 - \$1,000 \$1,001 - \$10,000 \$10,001 - \$100,000	Guarantor	